

# TRANSMITTAL FORM

*(to be used for all correspondence after initial filing)*

<b>Application Number</b> <b>Filing Date</b> <b>First Named Inventor</b> <b>Group Art Unit</b> <b>Examiner Name</b>	<b>10/588,550</b> <b>August 7, 2006</b> <b>SEOK, Chang Sung</b> <b>3681</b> <b>David D. Le</b>	
<b>Total Number of Pages in This Submission</b>	<b>5</b>	<b>Attorney Docket Number</b> <b>043946-2</b>

## ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input checked="" type="checkbox"/> <b>Information Disclosure Statement</b> <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group ( <i>Appeal Notice, Brief, Reply Brief</i> ) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) ( <i>please identify below</i> ):
		<b>Remarks</b> <input checked="" type="checkbox"/> The Director is hereby authorized to charge any additional fees required or credit any overpayments to Deposit Account No. 50-2478 for the above-identified docket number.

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

<b>Firm or Individual name</b>	<u>Thomas W. Cole, Reg. No. 28,290</u> <u>Roberts Mlotkowski &amp; Hobbes P.C.</u> <u>P.O. Box 10064</u> <u>McLean, VA 22102</u>	
<b>Signature</b>		
<b>Date</b>	<b>July 30, 2007</b>	

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